

PART I

NAME(Last)

LOBBYIST

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

(First)

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STATE OF HAWAS TATE ETHICS COMMISSION

TELEPHONE

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

(Middle)

Kusunoki, Susan A.	536-5688
MAILING ADDRESS (Street)	FAX
84 N. King Street	536-5720
(City) (State) (Zip C	Code)
Honolulu, HI 96817	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)	TELEPHONE
Pacific Management Consultants, Inc.	536-5688
MAILING ADDRESS (Street)	FAX
84 N. King Street	
(City) (State) (Zip (Code)
Honolulu, HI 96817	
PART II ORGANIZATION VOLLI ORBY FOR (Do not abbreviate)	TELEPHONE
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	ILLEFIONE
Guy Carpenter & Company, Inc.	
MAILING ADDRESS (Street)	FAX
One Convention Center 701 Pike Street, Suite 2000	
	Code)
(City) (State) (Zip of Seattle, WA 98101	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
MAILING ADDRESS (Street)	FAX
	Codo)
(City) (State) (Zip	Code)
	DECEMEN DAY
	Page 1 of

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY								
1 AK1 III	DEGUNT HON	OF COBULCTS OF CIT WHICH	1 100	EXPECT TO LUBBY				
[] Agri	iculture	[] Education	[]	Human Services	[]	Science, Technology & Economic Development		
1 (mmunications & blic Utilities	[] Government Operations & Finance	[X]	Intergovernmental Relations, International Affairs	[]	Tourism & Recreation		
	nsumer Protection commerce	[] Hawaiian Affairs	[]	Labor & Employment	[]	Transportation		
	ture, Arts, Historic servation	[] Health	[]	Planning, Land & Water Use Management	[]	Other: (indicate below)		
	ology, Energy vironmental Protection	[] Housing	[]	Public Safety & Corrections				
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PART IV CERTIFICATION OF LOBBYIST								
I hereby certify that the information furnished bove is, to the best of my knowledge, correct and complete.								
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1	/)h	Stellinge			1/14	-/05		
(Signature of Lobbyist)					(Date)			
(Digitality of 2000) (Date)								
PART V AUTHORIZATION TO LOBBY								
NAME	AUTHORIZATIO	N TO EODD!	TIT	LE OF AUTHORIZING OFFIC	FR OR	PERSON REPRESENTED		
INCIVIL			•••			2.10011.112.712020		
Paul Picar	rdo							
NAME OF ORGANIZATION (if applicable)				ELEPHONE				
				06-223-	06-223-1200			
Guy Carpenter & Company, Inc.								
MAILING ADDRESS (Street)					ΑX			
					06-621-3854			
701 Pike Street, Suite 2000								
(City) (State) (Zip C				de)	-			
Seattle, W		(-1337)		` .	,			
I hereby authorize the above - named, person to engage in lobbying activities on behalf of the undersigned.								
X Ral 9 1/2 1/05								
1 A	(Signature of Authorizing Officer or Person Represented) (Date)							